

P13000070815

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13 AUG 22 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MR
8/27/13

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: BROOKLYN CITY FILMS INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: SJ COOPER & ASSOCIATES

Name (Printed or typed)

3269 STURGEON BAY COURT

Address

NAPLES, FL 34120

City, State & Zip

239-398-3637

Daytime Telephone number

STEVEN@SJCFINANCE.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

BROOKLYN CITY FILMS INC.

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address

3269 STURGEON BAY COURT

NAPLES, FL 34120

13 AUG 22 PM 1:10
Mailing address, if different is:

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A LEGAL & LAWFUL CORPORATION

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **PAUL STARKMAN, PRESIDENT**

Address: **49 HENRY STREET
BROOKLYN, N.Y. 11201**

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

(conti.)

| | |
|-----------------------|---------------------------------|
| Name and Title: _____ | Name and Title: <u>FILED</u> |
| Address: _____ | Address: <u>13 AUG 22 11 10</u> |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

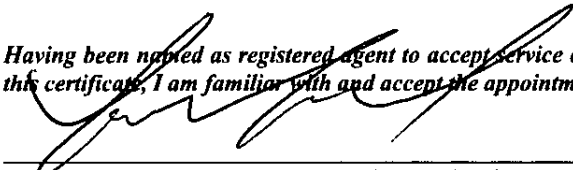
Name: LYNN BLOODGOOD
Address: 3269 STURGEON BAY COURT
NAPLES, FL 34120

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LYNN BLOODGOOD
Address: 3269 STURGEON BAY COURT
NAPLES, FL 34120

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

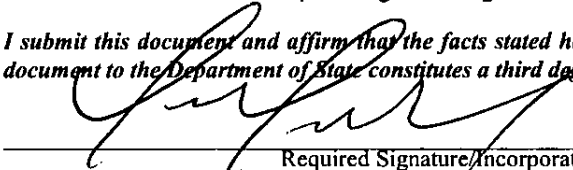


Required Signature/Registered Agent

08/14/13

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

08/14/13

Date